This Page Is Inserted by IFW Operations and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents will not correct images, please do not report the images to the Image Problem Mailbox.

Please type a plue sign (+) inside this box -> +

DECLARATION FOR UTILITY OR

DESIGN

60130-1495

Chien

COMPLETE IF KNOWN

ويركنها والمراجعين والمال

PTO/SB/U1 (10-00)
Approved for use through 10/31/2002. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number

First Named Inventor

PATENT APPLICATION Application Number (37 CFR 1.63) Herewith Filing Date ☐ Declaration Submitted after Initial ☑ Declaration OR Group Art Unit Submitted Filing (surcharge with Initial (37 ČFR 1.16 (e)) **Examiner Name** Filing required) As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled INBOARD BRAKING TRAILER WHEEL END ASSEMBLY (Title of the Invention) the specification of which is attached hereto as United States Application Number or PCT International OR was filed on (MM/DD/YYYY) (if applicable). Application Number | and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's cartificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing data before that of the application on which priority is claimed. Priority Certified Copy Attached? Prior Foreign Application Number(s) Foreign Filing Date Not Claimed Country NO (MM/DD/YYYY) YES ☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Filing Date (MM/DD/YYYY) Application Number(s) Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the CNef Information Officer, U.S. Patent and Trademark Officer, Washington, DC 20231 DO NOT SEND FETS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box 🛨
--

PTO/SB/01 (10-00) Approved for use through 10/31/2002. OM8 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application Customer Number l026096 Direct all correspondence to: or 🗌 Correspondence address below or Bar Code Label John M. Siragusa Name 400 W. Maple Road Address Suite 350 Birmingham Michigan 48009 City (248) 988-8360 (248) 988-8363 United States Country Telephone I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Given Name Family Name CHIEN (first and middle [if any]) or Surname Inventor's -20-04 Signature US MI Residence: City State Country Citizenship 30515 Rushmore Circle Mailing Address Mailing Address Franklin MI 48025 State Country ☐ A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Given Name Family Name PEAKER Martin (first and middle [if any]) <u>or Surname</u> inventor's Signature Date Chester Country UK Residence: City Citizenship Mailing Address 8 Woodlca Avc. Mailing Address Upton Chester CH2 INE UK State Country \square Additional inventors are being named on the $\underline{1}$

[Page 2 of 2]

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box \longrightarrow $\boxed{+}$

DECLARATION — Utility or Design Patent Application									
	Customer Nor Bar Code		26096		OR 🗌	Correspondence address below			
Name John M. Siragusa									
Address 400 W. Maple Road									
Suite 350 Address									
City Birmingham	Michigan ZIP 48009								
Country United States		Telephor	(248)	988-8	3360	(248) 988-8363 Fax			
I hereby ductare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INV	NAME OF SOLE OR FIRST INVENTOR:								
Given Name Danicl (first and middle [if any]) Family Name CHIEN or Surname									
Inventor's Signature Date									
Residence: City Franklin			State MI		Country	US Citizenship			
Mailing Address 30515 Rushmore Co	ircle								
Mailing Address									
City Franklin	din State MI				8025	Country US			
NAME OF SECOND INVENTOR	:			A petit	ion has b ee n	filed for this unsigned inventor			
Given Name Family Name PEAKER or Surname									
Inventor's Signature Date									
Residence: City Upton State Ches					Country	UK Citizenship			
Mailing Address 8 Wood]ca Ave.									
Mailing Address									
City Upton	ty Upton State Chester ZIP C112 1NE Country UK								
Additional inventors are being named	on the 1	supplemen	ntal Addition	al Inven	tor(s) sheet(s) P	TO/SB/02A attached hereto.			

Please type a plus sign (+) Inside this box	→ [1	
---	------------	---	--

PTO/SB/02A (11-00)
Approved for use through 10/51/2002. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it contains a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons are required to rescond

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if a		A potition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Namo or Surnamo					
David	uvid C				CHAN			
Inventor's Signature	·· = 1 9 1 (12/1: PS.1 \ _							
Rosidence: City	State	Flintshire e		UK. Country		UK Citizenship		
4 The Larches Mailing Address								
Mailing Address								
City Hawardon	State	e Flintshire	С	ZIP CH5 3LH	Count	UK		
Name of Additional Joint Inventor, if a	пу:			A petition has been file				
Given Name (first and middle [if any])		\mathbf{I}	Family Na	me or S	umame		
Garry BRERETON								
Inventor's Signature Date								
Residence: City Rosset	State	Wrexham	۱ ,	Country		UK Citizenship		
Mailing Address 3 Pultation Cottages, Trevalyn								
Mailing Address								
Rossct City	State	Wrexhar	m	ZIP LL12 0DY	Çou	UK ntry		
Name of Additional Joint Inventor, if a	лу:		□ ^	petition has been filed	for this	unsigned inventor		
Given Name (first and middle [if any])				Family	Name c	or Surmarne		
Peter Kerslake GIBBENS								
Inventor's Signature						Date		
Lliswerry Residence: City	esidence: City State			UK Country	UK Citizenship			
Malling Address 32 Royston Crescent								
Mailing Address								
City Lliswerry	State	Newport	1	ZIP NP19 4LU	Co	UK untry		

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Palent and Trademark Office, Washington, DC 20231. DO NOT SEND FFFS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/0ZA (11-00)

Approved for use through 10/31/2002. OMB 0851-0032

U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _1_ of 2

Name of Additional Joint Inventor, if a	пу:			A pctition has been f	illed for	this unsigned inventor	
Given Name (first and middle [if arry])				Family Na	me or S	Sumame	
David			CHA	Ŋ			
inventor's Signature		•			Date		
Hawarden Residence: City	State	7lintshire	re UK Country			UK Cht/zenship	
4 The Larches Malling Address							
Mailing Address							
City Hawarden	State	Flintshir	TU	ZIP CH5 3LH	Count	ry ^{UK}	
Name of Additional Joint Inventor, if an	ıy:	· · · · · ·	0	A petition has been file	ed for th	is unsigned inventor	
Given Name (first and middle [if any]	Given Name (first and middle [if any]) Family Name or Sumame					Sumame	
Garty BRERETON							
Inventor's Signature Date 21/10/						Date 21/10/03	
Residence: City Rosset	State	Wrexhan	m Country UK			UK Citizenship	
Mailing Address 3 Pultation Cottages, Trevalyn							
Mailing Address							
Rosset City	State	State Wrexham ZIP LL12 0DY Co			Cou	UK	
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Sumame			
Peter Kerslake GIBBENS							
Inventor's Signature Date							
Lliswerry Residence: City	Idence: City State Country Citizenship						
Mailing Address 32 Royston Crescent							
Mailing Address							
City Lliswerry	State	Newpor	rt	ZIP NP194LU	Co	UK	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Weshington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Weshington, DC 20231.

PTRESIANTA 419-00)
Approved for our through 100-100-00. CMB 0031-0003
U.S. Paign and Trademark Office; U.S. DEPARTMENT OF CONNERGES
10-8 collection of inflamedamic days it contains a well-GME_contains through

DECLARATION

Under the Paperwook Rediction Art of 1855, no services are received to respond

ADDITIONAL INVENTOR(5)
Supplemental Sheet
Page ___ of __2

Many of Additions Before Theorems of the									
Name of Additional Joint Inventor, if any: Apathon has been fled for this unsigned inventor									
Given Manee (first and middle jit anyl)				Formly Name or Samane					
David CHAN									
hiventor's Signotuse						Dorto			
Risidencii: City	st City Flintskire					Cilizonship			
Maling Address 4 The Labelles			A 2002	2.00 <u>2000 - 10 10 10 10 10 10 10 10 10 10 10 10 10 </u>	486.3				
Mailing Address									
City Haustines	8ts	- Flintshire	9	ZIP CHS SUH Count		_{by} UK			
Name of Additional Joint Inventor, if a	Name of Additional Joint Inventor, if any:								
Given Name jihrat end middle jih nay	Ø.		Formily Name or Surmanne						
Girty BRERETON									
Brivantor's Signature Signature									
Reddenos: City Rossitt	Store Wreatian			Country LIK		Chteurship			
Moding Address 3 Pultation Cottoges, Trevalys									
Maling Address									
Hosses	81	Wrextine	30	EP LLIZ ODY	Ċm	UK #N			
Name of Additional Joint Inventor, if any: Apelion has been field for this unsigned inventor									
Ghrèn Name (dest and saiddle (f anyl)				Parrily Name or Suspense					
Peter Kendake	IBBENS								
Signature P. R. U. Chan					70000 market	Part 03/01/04			
Desidence: City	State State			Panipy UK	UK Chizonship				
Haliber Address 32 Royston Crescens									
Melling Advances									
City Llisweary	State	Newport		ZIP NPI9 4LU	J.C.	UK.			

Berlise Now Scienced: This form is extinated to take 2f releases to complete. This will vary deprecing upon the names of the interferences. Any comments of the purpose of the property of the

Płażnickym in planistym (14) traisty (12) bios 🛶 👍

Picazo type o plunity (1) bio: Picazo type o plunity (1) bio: Picazo type o plunity (1) bio: Approved the see through \$10,5000. GNB \$651-3312 U.S. Paleni and Theference (1) o provide on provide managed to provide on the terms of the control of t ADDITIONAL INVENTOR(S) Supplemental Sheet Page ____ of ____ **DECLARATION**

The state of the s								
Manne of Additional Joint Inventor, if any: Apotton has been footer this unsigned inventor								
Given Name (first and middle (if stryf)				Family I	lame or l	Виполо:		
Poul ROBERTS								
Inventor's P.R.J.			Date 9/01/04					
Newport Residence: City	84	t.		Caunity UK.		Cilizonship		
Maling Address 97 Brynglas Road								
Malling Address								
Cary Newport	Str	/*		ZIP NP20 SQU	Const	USC .		
Name of Additional Joint Inventor, if ϵ	my:		Ē	A polition base boen (icd ter t	ila umagnod taxentor		
Given Name (first and middle ji en	yD .			Family Marne or Semano				
Ponl Anthony TEOMAS								
Exemple PAN 8/1/04 Signature Pan								
Residence: City State			Country UK CROzenskip.			UK. Catizenship		
Marting Authoriza Fornilea, Llauvaches, Caldicos								
Killing Address								
Newport City	S	after .		31P NF25 3AY	Con	UK mby		
Name of Additional Joint Inventor, if any: Aposion besteen filed for this unsigned inventor								
Given Name (first and middle (if aryl)			Family Massa or Sumana					
Tonathan Lestie Christopher			MORADAL					
Britanica Saudilla								
Ross-On-Wye Herefordshire			hire UK UA Country Chronistic					
Malling Address ²⁷ Greege Park, Wildchurch								
Mailing Addinoss								
City Ross-On-Wye	361	eredordនៅនៃ ទ	ino	EMP HER9 GEA	C ₂	UK.		

Bustes Hour Statement This form is collected to take 21 results to complete. Time will very describe appearing appearing the facilitation case. Any comments of the facilitation case. Any comments of the facilitation of the fac